

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 248 / 4189

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICHARDSON FOR PRESIDENT, INC.

**A.**

Full Name (Last, First, Middle Initial)

BONNIE L. BLAIR

Mailing Address

603 AVENUE G

City

BOULDER CITY

State

NV

Zip Code

89005

FEC ID number of contributing  
federal political committee.

Name of Employer  
NOT-EMPLOYED

Occupation

NOT-EMPLOYED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 8 / 2 0 0 7

Amount of Each Receipt this Period

250.00

Transaction ID: 17a-000113091

**B.**

Full Name (Last, First, Middle Initial)

BONNIE L. BLAIR

Mailing Address

603 AVENUE G

City

BOULDER CITY

State

NV

Zip Code

89005

FEC ID number of contributing  
federal political committee.

Name of Employer  
NOT-EMPLOYED

Occupation

NOT-EMPLOYED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 8 / 2 0 0 7

Amount of Each Receipt this Period

100.00

Transaction ID: 17a-000119666

**C.**

Full Name (Last, First, Middle Initial)

EVELYN M. BLAIR

Mailing Address

7730 CEDAR CANYON ROAD NE

City

ALBUQUERQUE

State

NM

Zip Code

87122

FEC ID number of contributing  
federal political committee.

Name of Employer  
COMMISSION FOR THE BLIND

Occupation

ADMINISTRATOR

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 0 / 2 0 0 7

Amount of Each Receipt this Period

100.00

Transaction ID: 17a-000124987

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....